PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

CLAIMS AS FILED - PART I								IALL EI	YTITY		OTHER	THAN
			(Column 1)		(Colu	(Column 2)		TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			16	16				RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		8/	SIC FEE	370.00	ОЯ	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			// minus 20=		•			X \$ 9=		ОЯ	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 =		2			X42=	84	OR	X84≃	
MULTIPLE DEPENDENT CLAIM PRESENT								140=	<u> </u>	OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2		OTAL		OR	TOTAL	
	6/5/2 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							MALL	ENTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PAID I	BER	PRESENT EXTRA	f	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 24	Minus	. 2	0	= H	>	X\$ 9≃	36.	OR	X\$18=	
	Independent	NTATION OF M	Minus ULTIPLE DE	PENDENT	S CLAIM	-3		(42=	126.	OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OWNS 162.								140=		OR	+280=	
000.								TOTAL IT. FEE	162.	OR	TOTAL ADDIT. FEE	
4	124 14	(Column 1)		(Colun	nn 2)	(Column 3)				70	MUS. LEE	
AMENDMENT B		CLAIMS		HIGH	ST	100.507			ADDI-			ADDI
		REMAINING AFTER AMENDMENT		PREVIO PAID	USLY	PRESENT EXTRA	Æ	ATE	TIONAL		RATE	ADDI- TIONAL FEE
	Total	. 16	Minus	- 2	4	•	×	\$ 9=		OR	X\$18=	
AME	Independent	. 2	Minus	*** 9	3	-		42=		OR	X84=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								\	Un		
								140= TOTAL		OR	+280≃	
ADD .										OR ,	YOTAL ADDIT, FEE	
7/12/04 (Column 1) (Column 2) (Column 3)												
AMENDMENT C	, 1 1 1	CLÁIMS REMAINING AFTER AMENDMENT	AFT) and lie o	HIGH NUME PREVIO PAID F	BER	PRESENT EXTRA	R	ATE	ADDI- FEE		RATE	ADDI- TIONAL FEE
	Total	· 15	Minus	44		-	×	\$ 9=		OR	X\$18=	
	Independent	. 1	Minus	***			×	42=	/		X84≃	
`_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							77		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3,										OR	+280=	
**	I the "Highest Nu	mber Previously Pa	aid For IN THI	S SPACE is	less that	n 20, enter "20."	,	TOTAL T. FEE		OR,	TOTAL ODIT. FEE	
		mber Previously Pa abor Previously Pai					r found i	n the appr	opriate box	in col	ımn 1.	